

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		2-20-01
O.I.P.E. CLASSIFIER		47	3/2/01
FORMALITY REVIEW	A-S	943	5-22-01
RESPONSE FORMALITY REVIEW	NN	778	8/1/01
	XD	832	10/1/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/24/02
2	1/8/02
3	1/8/02
4	1/8/02
5	1/8/02
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49	1/8/02
50	1/8/02

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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373/8/2  
 388/10/31